

Effects of Medical Marijuana Legalization

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Legalization of marijuana, whether for medicinal or other purposes, often leads to decreases in perceived harm and social disapproval for marijuana, and increases in use among youth. Sending the message that marijuana should be used as medicine is confusing for youth, and has a negative effect on substance abuse prevention efforts.

What the "Medical Marijuana" Statistics Already Say:

- According to the 2007-2008 State Estimates of Substance Use, **four of the top five top states, and ten of the 16 states** with the highest percentage of past month marijuana users ages (12-17) are states with medical marijuana programs.¹ These states listed by ranking include:
 - 1.) Vermont
 - 2.) Rhode Island
 - 4.) Colorado
 - 5.) Maine
 - 6.) Montana
 - 7.) Oregon
 - 8.) New Mexico
 - 10.) Alaska
 - 14.) Nevada
 - 16.) Michigan
- Medical marijuana states now occupy **four of the top five states, and 10 of the top 16 states** with the lowest age of first use for marijuana among those ages 12-17.² These states listed by ranking include:
 - 1.) Vermont
 - 2.) Colorado
 - 3.) Rhode Island
 - 5.) New Mexico
 - 6.) Oregon
 - 8.) District of Columbia
 - 9.) Montana
 - 11.) Hawaii
 - 15.) Maine
 - 16.) Alaska
- The medical marijuana ballot initiative states are clustered at or near the top of the list in terms of drug addiction and abuse. Medical marijuana ballot-initiative states occupy **five of the top seven slots, and ten of the top twenty slots** in ranking of drug addiction and abuse ages (12-17).³ These states listed by ranking include:
 - 2.) Colorado
 - 3.) New Mexico
 - 4.) Montana
 - 6.) Oregon
 - 7.) Nevada

¹ Substance Abuse and Mental Health Services Administration (SAMHSA), State Estimates from the 2007-2008 National Surveys on Drug Use and Health, 2010

² Ibid

³ Ibid

- 11) Hawaii
- 14) Rhode Island
- 17) Vermont
- 18) Michigan
- 20) Alaska

- Medical marijuana states rank as **thirteen of the lowest twenty states** for the perception of risk for smoking marijuana once a month ages (12 - 17).⁴ These states listed by ranking include:

- 31) Michigan
- 34) New Mexico
- 36) Montana
- 37) Nevada
- 38) California
- 39) Hawaii
- 42) Rhode Island
- 43) Maine
- 44) Washington
- 45) Alaska
- 46) Oregon
- 49) Colorado
- 50) Vermont

- According to the 2007-2008 State Estimates of Substance Use, **Vermont, a medical marijuana state, had the highest rate in the country of past 30 day use of marijuana among students ages (12-17), at 10.86%.**⁵

National Statistics

Age of Initiation:

- Among the 8th-grade respondents in the 2008 Secondary Schools Survey by Monitoring the Future, 4.7% said they had tried marijuana by the end of 6th grade. In 2007, the older respondents give lower retrospective estimates of their marijuana use by 6th grade: 3.5% among 10th-grade respondents and 2.4% among 12th-grade respondents.⁶
- The age of initiation for marijuana use has been decreasing, as 40.2% more 8th grade students report lifetime use of marijuana in 2009, 15.7%, than did in 1992, 11.2%.⁷

Perception of Harm and Social Disapproval:

- The 2009 Monitoring the Future Survey revealed the perceived harm for smoking marijuana once or twice, occasionally, and regularly has been decreasing among the 8th grade since 2007.⁸

⁴ Ibid

⁵ Ibid

⁶ National Institute on Drug Abuse (NIDA), Monitoring the Future, National Survey Results on Drug Use, 1975 – 2008

⁷ NIDA, Monitoring the Future, Overview of Key Findings, 2009

⁸ Ibid

- The social disapproval for smoking marijuana once or twice, occasionally, and regularly has been decreasing among the 8th grade since 2007.⁹
- Research demonstrates that softening attitudes generally precede an increase in drug use rates by approximately two years.

Usage Rates Increasing Nationally:

- According to the 2009 National PRIDE Survey data, there was an increase for all grades (6-12) in past 30-day use of marijuana.¹⁰
- The 2009 Monitoring the Future Survey data shows that for the second year in a row among 10th graders, and for the first time among 12th graders, past 30 day use of marijuana has eclipsed that of tobacco.¹¹

National Treatment and Emergency Room Statistics:

- From 1997 to 2007, **the number of persons aged 12 or older in treatment for marijuana dependence and abuse increased 45%, from 197,840 to 287,933.**¹²
- In 2007, **60.8% of all youth ages (12-15), and 55.9% of ages (15-19) admitted for drug and alcohol treatment were admitted for marijuana abuse.**¹³
- From 2004 to 2006, **emergency room admissions for all ages where marijuana was implicated increased from 281,619 visits in 2004, to 290,563 in 2006.**¹⁴

What the Research Shows To Support the Need for Prevention:

- Addiction is a developmental disorder that begins in adolescence, sometimes as early as childhood, for which effective prevention is critical.¹⁵
- Addiction is complex and influenced by a number of factors, including genetics, environment and age of first use.¹⁶
- According to studies by the National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism, the younger a person first uses drugs or alcohol, the greater the likelihood that they will become dependent and/or addicted to drugs and alcohol as an adult.¹⁷
- Research illustrates that the decline in the use of any illegal drug is directly related to its perception of harm or risk, and social disapproval by the user.

⁹ *Ibid*

¹⁰ PRIDE Surveys, 2008-2009 National Summary, Grades 6-12, 2009

¹¹ NIDA, Monitoring the Future, Overview of Key Findings, 2009

¹² SAMHSA, Office of Applied Studies, Treatment Episode Data Set, Drug and Alcohol Services Information System, 2007

¹³ *Ibid*

¹⁴ Drug Abuse Warning Network, National Estimates of Drug Related ED Visits, 2006

¹⁵ Quote by Dr. Nora Volkow, Director of NIDA

¹⁶ NIDA, Reducing the Public Health Burden of Substance Abuse, 2008

¹⁷ National Institute on Alcohol Abuse and Alcoholism (NIAAA), Underage Drinking A Growing Healthcare Concern, 2006

Increasing the Age of Initiation Is Key

- Children who first smoke marijuana under the age of 14 are more than five times as likely to abuse drugs as adults, than those who first use marijuana at age 18.¹⁸
- Policies, practices, programs and strategies specifically tailored to raising the age of initiation for substance use among youth must be promoted.

Conclusion

Research shows that there is a direct correlation between decreases in perception of harm and social disapproval and increases in drug use. Research also demonstrates that the most effective prevention reduces the access and availability of drugs and increases consequences for use. With national data already showing softening attitudes and across the board increases for drug use – particularly marijuana, which increased in all grades according to the most recent PRIDE Survey data – legalizing medical marijuana and thereby reducing the associated consequences will lead to a certain and significant increase in marijuana use throughout the United States.

¹⁸ The National Household Survey on Drug Abuse (NHSDA) report, 2002

It takes maturity & sophistication to look beyond
emotionally ^{driven} speech and recognize ~~as~~ quiet, but equally
compelling ~~evidence~~ indicators like data, ~~as~~
evidence to guide sound decisions that will
govern citizens ~~for a~~ healthy, prosperous,
to be reasonable and

20 on HS committee
at least x of you have kids
smoking pot